

Town of Blacksburg
Meals Tax Remittance
P O Box 90003
300 S Main St
Blacksburg, VA 24062-9003
(540) 961-1105

Email: Finance@blacksburg.gov

## **INSTRUCTIONS**

- Complete Sections A, B & C below.
- File on or before the 20<sup>th</sup> day of the month following the month being reported. In person Deliver to our office by 5:00 pm on the 20<sup>th</sup> of each month. By mail postmark on or before the 20<sup>th</sup> of the month.
- Make check payable to Town of Blacksburg.
- Mail to: Town of Blacksburg, P O Box 90003, Blacksburg, VA 24062-9003.

A. Owner & Business Information									
Owner's Name Phone									
Mailin	a Address	Block/ Street Name		City			State	Zip	
IVICIIIII	ig Addiess.	Oity			Otato	21			
Business / Trade Name Phone									
Divisid Address Divid Occupant News (co. DO Document									
Physical Address: Block/ Street Name ( no PO Boxes)			D Boxes)	City		,	State Zip		)
Social Security Number of Owner Fed			Federal ID Number	eral ID Number Em			il Address	<u> </u>	
B. Calculating Tax									
1.		Total Gross Receipts for the Month of			Month		Year		\$
2.	Less Allowable Deductions (Attach List of Items) If Zero, enter "0."						\$		
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3.	Taxable Gross (Subtract Line 2 from Line 1)								\$
4.	6% Tax of Gross from Line 3 (Multiply Line 3 by 6%)							\$	
5.	Less 3% Discount-Only when filed & paid on or before the 20 <sup>th</sup> (Multiply Line 4 by 3%)								\$
6.	Total Tax Less Discount (Subtract Line 5 from Line 4)								\$
7.	Penalty (Multiply line 6 by 10%)								\$
8.	Interest 10% per Annum								\$
9.	Total Due (Remember to include Penalty and Interest from line 7 & 8 if paid late )								\$
C. Declaration of Seller  I declare that the foregoing statement and figures are true, full and correct to best of knowledge and belief.									
Signature of Owner or Agent					Date				
Title Phone									